

HUMAN SERVICES DEPARTMENT[441]

Notice of Intended Action

Twenty-five interested persons, a governmental subdivision, an agency or association of 25 or more persons may demand an oral presentation hereon as provided in Iowa Code section 17A.4(1)“b.”

Notice is also given to the public that the Administrative Rules Review Committee may, on its own motion or on written request by any individual or group, review this proposed action under section 17A.8(6) at a regular or special meeting where the public or interested persons may be heard.

Pursuant to the authority of Iowa Code section 249A.4, the Department of Human Services proposes to amend Chapter 79, “Other Policies Relating to Providers of Medical and Remedial Care,” Iowa Administrative Code.

Historically, since the habilitation services program began, the upper rate limit for hourly services has been considered to be set higher than the actual cost and the daily rate cap has been considered to be set too low, resulting in providers’ submitting requests for exception to policy to exceed the daily home-based habilitation services upper rate cap. These amendments will balance the rates.

These amendments propose to:

1. Increase the daily rate cap for home-based habilitation services from \$105.97 to \$200.
2. Change the definition of a daily unit of service for home-based habilitation services from 14 hours to 8 or more hours. A daily unit of service will be when 8 or more hours of direct services are provided during a 24-hour period on average over the course of a calendar month.
3. Maintain the hourly rate cap and limits for home-based habilitation services.
4. Limit the total daily cost for hourly home-based habilitation services to no more than the daily rate cap set for home-based habilitation services.

Any interested person may make written comments on the proposed amendments on or before November 20, 2012. Comments should be directed to Harry Rossander, Bureau of Policy Coordination, Department of Human Services, Hoover State Office Building, 1305 East Walnut Street, Des Moines, Iowa 50319-0114. Comments may be sent by fax to (515)281-4980 or by e-mail to policyanalysis@dhs.state.ia.us.

These amendments do not contain any waiver provisions because the Department has an established procedure for considering exceptions to policy. A waiver of any of these rules may be requested through that process. In addition, requests for the waiver of any rule may be submitted under the Department’s general rule on exceptions at 441—1.8(17A,217).

After analysis and review of this rule making, no impact on jobs has been found.

These amendments are intended to implement Iowa Code section 249A.4.

The following amendments are proposed.

ITEM 1. Amend subrule **79.1(2)**, provider category “Home- and community-based habilitation services,” as follows:

Provider category	Basis of reimbursement	Upper limit
Home- and community-based habilitation services:		
1. No change.		
2. Home-based habilitation	Retrospective cost-related. See 79.1(24)	\$46.70 per hour <u>not to exceed \$6083 per month, or \$105.97 \$200 per day.</u>
3. to 5. No change.		

ITEM 2. Amend paragraph **79.1(24)“a”** as follows:

a. Units of service.

(1) No change.

(2) A unit of home-based habilitation is one hour (for up to 7 hours per day) or one day (for 8 or more hours per day), based on the average hours of service provided during a 24-hour period as an average over a calendar month. Reimbursement for hourly services shall not exceed the upper limit for daily home-based habilitation services set in 79.1(2). EXCEPTIONS:

1. A unit of service is one day when a member receives direct supervision for 14 or more hours per day, averaged over a calendar month. The member's comprehensive service plan must identify and reflect the need for this amount of supervision. The provider's documentation must support the number of direct support hours identified in the comprehensive service plan. The daily unit of service shall be used when a member receives services for 8 or more hours provided during a 24-hour period as an average over a calendar month. The hourly unit shall be used when the member receives services for 1 to 7 hours provided during a 24-hour period as an average over a calendar month.

2. When cost-effective, a daily rate may be developed for members needing fewer than 14 hours of direct supervision per day. The provider must obtain approval from the Iowa Medicaid enterprise for a daily rate for fewer than 14 hours of service per day. The member's comprehensive service plan must identify and reflect the need for the amount of supervision and skills training requested. The provider's documentation must support the number of direct support hours identified in the comprehensive service plan.

(3) to (6) No change.